Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
_			(Column 1)		(Column 2)		T	TYPE		OR	R SMALL ENTITY		
TOTAL CLAIMS			14					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	SASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			4 minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS .			4 minus 3 =		* 1			X42=		OR	X84=	84	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+140=		OR	+280=	ļ	
* If	the difference	in column 1 is l	ess than zero, enter "0" in columr			olumn 2	٠ ـ	TOTAL		OR	TOTAL	834	
CLAIMS AS AMENDED - PART II								•	=		OTHER	THAN	
	00	(Column 1)	(Column 2) (Column 3					SMALL E	ENTITY	OR	SMALL	ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	5 01 4 11 4	=		X42=		OR	X84=		
╙	FIRST PRESE	NTATION OF MU	JUIPLE DEF	PENDEN	CLAIM			+140=		OR	+280=		
							L	TOTAL		ΩD	TOTAL		
							Αſ	DDIT. FEE		On	ADDIT. FEE		
_		(Column 1) CLAIMS		(Colui		(Column 3)						2.00	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME.	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	r CLAIM		╵┝	+140=			+280=		
ĺ								TOTAL		OR	TOTAL		
							Al	DDIT. FEE		OR	ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X42=			X84=		
	FIRST PRESENTATION OF MI		ULTIPLE DEPENDEN		T CLAIM	AIM 🔲				OR	ļ		
_		and the face of the second		6 "	- 407	h		+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR											TOTAL ADDIT. FEE		
		nber Previously Pa					er foun	d in the app	propriate bo	x in co	lumn 1.		